

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2003 8:00 am**  
**Secretary of State**

09-02-2003 90181 043 \*\*\*158.75

**DOCUMENT # P01000048112**

**1. Entity Name**  
**ENET MARKETING SOLUTIONS, INC.**



**Principal Place of Business**  
**4931 SW 94 WAY**  
**COOPER CITY FL 33328**

**Mailing Address**  
**4931 SW 94 WAY**  
**COOPER CITY FL 33328**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number** **56-1106320**

Applied For

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**COLON, JENNIFER**  
**4931 SW 94 WAY**  
**COOPER CITY FL 33328**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **D** ☐ Delete  
**NAME** **COLON, JENNIFER**  
**STREET ADDRESS** **4931 SW 94 WAY**  
**CITY-ST-ZIP** **COOPER CITY FL 33328**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**CITY-ST-ZIP**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/28/03

954-680-5582

Date

Daytime Phone #

CR2E034 (4/03)

Attachment  
80142416

E NET MARKETING SOLUTIONS INC. P01000048112

Jennifer Colon Title D  
4931 S.W. 94TH Way  
Cooper City FL 33328  
954-680-5582

August 28, 2003

Florida Department of State  
Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee FL. 32314-6327

Dear Division of Corporations,

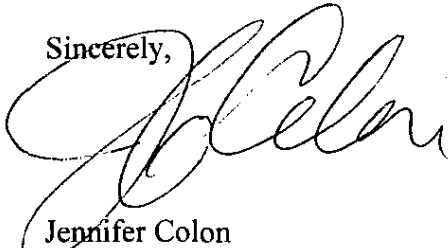
Thank you for taking time regarding my concerns. My incorporation date was 5/14/2001. I have received notice of the dissolution/revocation of E net Marketing Solutions Inc.

My accountant had explained he would be handling all my corporate affairs and renewals. He failed to tell me there was a renewal that would be due on Enet Marketing Solution Inc. and to look out for this or to call him if it had not arrived.

I had not received notice previous to this cancellation otherwise I would have actively pursued remaining active, rather than waiting for a dissolution notice to arrive and risk a penalty of \$550.00.

I would like consideration to file without penalty. I have enclosed \$150.00 to file and eagerly await your response.

Sincerely,



Jennifer Colon  
954-680-5582